

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BT		1-7-00
O.I.P.E. CLASSIFIER			1-14-00
FORMALITY REVIEW	JW	68746	1-27-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-appealable
 I Interference
 A Appeal
 O Objected

Best Available Copy

Claim	Final	Original	Date
1	✓	✓	3/24/00
2	✓	✓	4/14/00
3	✓	✓	5/1/00
4	✓	✓	5/1/00
5	✓	✓	5/1/00
6	✓	✓	5/1/00
7	✓	✓	5/1/00
8	✓	✓	5/1/00
9	✓	✓	5/1/00
10	✓	✓	5/1/00
11	✓	✓	5/1/00
12	✓	✓	5/1/00
13	✓	✓	5/1/00
14	✓	✓	5/1/00
15	✓	✓	5/1/00
16	✓	✓	5/1/00
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25	✓	✓	5/1/00
26	✓	✓	5/1/00
27	✓	✓	5/1/00
28	✓	✓	5/1/00
29	✓	✓	5/1/00
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31	✓	✓	5/1/00
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42	✓	✓	5/1/00
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44	✓	✓	5/1/00
45	✓	✓	5/1/00
46	✓	✓	5/1/00
47	✓	✓	5/1/00
48	✓	✓	5/1/00
49	✓	✓	5/1/00
50	✓	✓	5/1/00

Claim	Final	Original	Date
51	✓	✓	3/24/00
52	✓	✓	4/14/00
53	✓	✓	5/1/00
54	✓	✓	5/1/00
55	✓	✓	5/1/00
56	✓	✓	5/1/00
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76	✓	✓	5/1/00
77	✓	✓	5/1/00
78	✓	✓	5/1/00
79	✓	✓	5/1/00
80	✓	✓	5/1/00
81	✓	✓	5/1/00
82	✓	✓	5/1/00
83	✓	✓	5/1/00
84	✓	✓	5/1/00
85	✓	✓	5/1/00
86	✓	✓	5/1/00
87	✓	✓	5/1/00
88	✓	✓	5/1/00
89	✓	✓	5/1/00
90	✓	✓	5/1/00
91	✓	✓	5/1/00
92	✓	✓	5/1/00
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96	✓	✓	5/1/00
97	✓	✓	5/1/00
98	✓	✓	5/1/00
99	✓	✓	5/1/00
100	✓	✓	5/1/00

Claim	Final	Original	Date
101			
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If more than 150 claims or 10 actions
staple additional sheet here

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